The State of New Hampshire

	COUNTY	PROBATE CO	JRT		
II	N RE: Surrender of Parental Rights over		_		
	DOCKET NUMBER:				
1.	SURRENDER OF PARENTAL RIGHTS Of: Birth Mother Birth Father Legal Fathe Name of parent surrendering rights				
	Telephone City/town, state of residence				
	Mailing Address				
	Date of Birth Place of Birth				
2.	Name of other parent				
	Telephone City/town, state of residence				
	Mailing Address				
	Date of Birth Place of Birth				
3.	Child Name				
	Date of Birth Place of Birth				
4.	Is the child an Indian child as defined by the Indian Child Welfare Act	? Yes	No		
	If yes, name and address of tribe		ain No		
5.		orced/			
	If married or divorced, name of spouse				
^	And, if applicable, date of marriage date of divorce				
6.	Do you know the identity of the adoptive parents?	Yes	No		
	se read carefully or complete the information below before signing this				
By C	completing this surrender of parental rights. I understand that my paren	tal rights over	the		

By completing this surrender of parental rights, I understand that my parental rights over the child, including the rights of care, custody and control of the child, will cease when the court approves this surrender. I also waive any right to receive any notices about future hearings about the child.

I understand that after the court approves this surrender that all my parental obligations will be extinguished, except the obligation to pay any accrued unpaid child support.

I understand that after the court approves this surrender in compliance with New Hampshire law, that the surrender is final, and may not be revoked or set aside for any reason, unless the court finds that the surrender was obtained by fraud or duress, and that the withdrawal of the surrender is in the best interests of the adoptee. The failure of an adoptive parent to comply with an arrangement or understanding reached with the birth parent with respect to the post-surrender exchange of identifying or non-identifying information, communication or contact is not a reason to revoke or set aside a surrender.

I have been informed that child placing agencies duly licensed pursuant to RSA 170-E are available to counsel me about my decision to surrender my parental rights.

Surrend	er of Parental Rights over				
I have b	een provided legal counsel, un	less waived with approval of the court.			
		any money or anything of value for the completion of ermissible under New Hampshire law.			
By sign	ing this document below, I dec	lare:			
, ,	• that I am the parent of the above named child;				
	that all the information on thi				
•	 that I have read and understand the content of this document; 				
 that all of my questions have been answered by the court or its designee; 					
	that I wish this surrender of p	parental rights to take effect; and			
•	that (please check <u>one</u> of the	following):			
	I do not wish to receive co	onfirmation of the final adoption of this child.			
	I wish to receive confirma	tion of the final adoption of this child.			
Date: _		Signature			
	THE QT	ATE OF NEW HAMPSHIRE			
	COUNTY	DATE			
		party, known to me (or satisfactorily proven to be) and her free act and deed. Before me,			
		Judge			
If the	surrendering parent is a minor	or under guardianship, complete the following section.			
11 (110	Surremaching parent is a minor	or under guardianionip, complete the following scotion.			
	We are the parents or guardians and hereby give our assent to t	of the named birth parent who is surrendering his/her his surrender.			
s	ignature / Relationship	Address			
s	ignature / Relationship	Address			
	THE STA	ATE OF NEW HAMPSHIRE			
	COUNTY	DATE			
		party(ies), known to me (or satisfactorily proven to be) his/her free act and deed. Before me,			
My Comm	ission Expires				
Affix Seal		Judge/Justice of the Peace/Notary Public			
		ORDER			
Thie eu	rrender of parental rights is:	□ Approved □ Not approved			
		- Approved - Hot approved			
Date: _		Judge			
		-			